PDPPC September 22, 2021

Draft Stakeholder Notes for Review

John Barry opened the meeting, explaining how the housekeeping and attendance was managed. Kitten Sheridan went over attendance and voting rights.

August Minutes Comments and Corrections:

Renee Farmer made the following correction: Page 3 under rate change: First paragraph 2nd to last line SPAL –still have to stay in SPAL—not SAY in SPAL. The minutes were approved with this typo corrected.

Open Forum #1:

- Julie Reiskin urged people to read the EVV rule and testify if they have concerns. She said she had not studied them yet but they seem to allow people to be kicked off of CDASS for a year for noncompliance and was concerned because at least one of the two FMS agencies has constant problems with their EVV. This goes to the medical services board in October.
- Cheryl Hargett-Dorsett has two items:
 - 1. Anyone on Medicaid only El Paso County will provide vouchers to pay for a Colorado ID for participants on Medicaid. She is not sure if this is statewide. She wanted everyone to know.
 - 2. When her son had to get an ID there were numerous issues with the DMV. Not in compliance with public health rules. No adaptations for people with disabilities. It took 10 months to get this done and she needed the help of Legal Services. She asked that HCPF bring this to the Governor's Office.
- Allyson Wentzel, Director for Consumer Direct Colorado (CDCO): CDCO has a
 job opportunity for people who are either members or AR's they have peer
 trainer position. This is open for hire all of the time but currently looking to
 add to staff. If you know someone who is a member or AR and want more
 info please reach out to her. Posting is available online or people can call 844381-4433 and ask to speak to Emily or Allyson in the Colorado office or write
 to infocdco@consumerdirectcare.com
- Renee Farmer asked for the rule Julie mentioned and it was posted in the chat and is at http://hcpf.colorado.gov/sites/hcpf/files/MSB%2021-08-04B%PRM%20-%20SEP%202021.pdf
- Lana Eggers, who manages EVV at the Dept, said that the Dept is aware of systems issues and has done thorough research and said the problems are not systemic and they are working through individual issues. They are one-offs.
 Protocol does require compliance and if they see there is a problem, they will

not hold individuals accountable for systems failures. They have a reporting form and number for people to call. They have safeguards in place to avoid inaccurate strikes. This protocol is to help members comply with state and federal mandate. They are trying to help with compliance and mandate, through education of member compliance and training. She said that they have set a low threshold for compliance and are looking for 80% compliance each month. A member must be below 80% for 5 or 6 months (depending on if they complete a performance improvement plan), before 1 year removal from CDASS. Then strikes reset every January. There are many opportunities for improvement before punitive actions.

- Several people wrote in the chat that the problems are absolutely systemic and widespread. Lana says people are encouraged to report all problems to the EVV mailbox or call Jordan Larson who manages EVV for CDASS. The phone number for Jordan Larson 303-866-3580 or email EVV@state.co.us.
- People reported lots of failures in rural areas, perhaps due to a Geofence set by Palco and it was noted they should sent their Geofence to 5000 miles. It is a particular problem when not in the home. The Department prohibits the use of a Geofence and will follow-up with Palco.
- Many clients are experiencing ongoing issues. Robin Bolduc said it is systemic
 and it is the design of the system at Palco. This is how their app is designed
 regarding registering phones. The app also rarely works in rural communities.
 Robin asked what the plan is for people who get kicked off. The Department
 will follow up with Palco after we have more information on problems that
 members/attendants are experiencing.
- Erin said there is a 5 strike policy and they would work with case management and FMS to develop alternative care. The likelihood of anyone getting kicked off is low. They will provide training and help get into EVV compliance. It is not 100% all the time but they expect people to try. They want people to reach out to Jordan Larson who is the EVV policy specialist. They held stakeholder meetings over two months every other week. This protocol is to make sure employers are accountable and comply with state and federal regulation. The Department accept manually entered visits through the portals. Those manually entered visits are legitimate and do not count against anyone. If people use the web portal, a 1-800 number, or an app all are fine and count towards compliance.

RATE INCREASE

A CDASS rate increase will be effective 11/1 and people should receive info before 11/1 on their new allocations. HCPF made a temporary modification to case management

processes to decrease the workload during this rate change. Communication was sent out Monday and Tuesday.

- Cheryl: If you are in an appeal process, how does this effect an increase? Answer this is based on whatever is current. You will still get an increase.
- Case managers put in the chat that they appreciated HCPF making changes to make this process less onerous.
- Julie asked if there is American Rescue Plan Act (ARPA) money to make this
 easier in the future for case managers. Right now, it is multiple steps and takes a
 lot of time. Erin said continuing in this way is untenable and they want to
 automate the change process. They do have some ARPA money for this and
 want to get this into the queue with other projects being considered. They also
 had cooperation with the FMS vendors.
- Julie also said this is designed for our workers and while people can spend it how they want, she urged people to use it to increase wages as that was the purpose.
- Margaret Proctor asked if this is automatic or if we have to send rate increase forms. If this is a change of wage for attendants, you need to send in wage change forms. This does not change wage of attendants.
- Lisa asked how the rate increase was calculated and did it consider the current market and what we see in terms of wage inflation? Erin said in all of Medicaid, they get approval from the Joint Budget Committee (JBC) of the Legislature, then have to get federal approval. The increase right now is 2.5% passed by the CO General Assembly and something for Denver, which has a higher minimum wage. They have to follow the directives they are given. They got approval yesterday from CMS (the feds) and the JBC for additional rate increases and there will be more information soon.

COVID 19:

Erin said that the Federal government released info last week on vaccine mandates. What this means to us is unclear and rules from CMS will be put out in October. They do not see any specifics about HCBS. They want info about this. They are waiting for future guidance about what this looks like. They do have a state mandate in which the Governor directed CDPHE to mandate vaccines for employees that applies to agencies with licensure, so not all of HCBS. This will apply to IHSS but not CDASS.

• David asked, what is HCPF going to do when agencies discharge clients who quit rather than vaccinate? Their rules do not consider that home care is different from congregate facilities. He expressed a concern about people who could lose services. Is HCPF involved? He thinks they need to be. Also, for live-in

- caregivers, the city of Denver gave an exemption for live-in caregivers and CDPHE needs to respond. Even if they do not get vaccinated, they need to live there so not allowing them to work due to a mandate is counterproductive.
- Erin said the Dept has no ability to change that rule and they are looking at options to assist with staffing through the workforce team. They want to know if you are agency struggling with staffing. There is an exception process which is for a medical or religious exemption only.
- David said they should have influence.
- Cheryl asked if the mandate was Denver or Statewide. It is statewide, but Denver has its own.
- Some people noted in the chat that in rural areas agencies are already discharging or refusing cases because of this.

Jennifer VanCleave re Eligibility:

Jennifer said she did not have a lot of news. The Advance Child Tax Credits (part of ARPA) were received from July through the end of December. They are NOT countable income for Medicaid and not a countable asset for 12 months from the date of receipt. This mirrors other stimulus payments as to how they are counted or not counted.

We are still in the COVID lock-in period and still have not received an official end date, but they are planning the wind-down. When they have more info there will be communication and she will share with this group. She said as always if you get a request for verifications or redetermination, please fill these out so you are not in the large population of people with lock-in that will need to be reassessed at the end of the PHE.

Subcommittee and workgroup updates:

- Erin updated us on the IHSS agency as Authorized Representative (AR) meeting
 which happens monthly, it is tomorrow morning. Looking at form modifications
 and transition plan to remove agencies as being able to be an authorized
 representative for IHSS. They intend to bring forth a rule to the Medical Services
 Board (MSB). They will present to the PDPPC in October. They will present in
 November to the MSB, with a January implementation date.
- Emily Harvey updated us on the Employer 101 workgroup: It meets the first Tuesday of every month, from 1-3 p.m. The group meets on the 5th of October. The meetings are moving to Microsoft Teams and now have a toll-free number. If you want to join a workgroup to plan events, reach out to Emily.

• Cheryl Hargett-Dorsett asked, where does she start to switch ARs? Answer: Go to your case manager then get the new AR trained at CDCO. CDCO will send the completion documentation to the case manager.

FMS Member Satisfaction:

Allyson Weitzel spoke and reminded people that CDCO is the training and operations vendor for Participant-Directed Services (CDASS and IHSS). They provide training to CDASS members, IHSS agencies and case managers and also do satisfaction surveys with FMS providers. They do an annual member satisfaction survey. Only PALCO and PPL were included in this survey. These documents were provided.

She reviewed how the report differed from past years by summarizing comments.

These are on the website and also provided by request and when people are new.

They are happy to provide additional information upon request.

- Julie and Mark both said that they had received surveys only about Acumen not Palco.
- Erin said she wanted to look at it as the response was low. It dropped by 5%.
- Allyson said that they also did an Acumen survey in June.

BREAK (10 mins.)

PDPPC Active Proposals:

Minimum Age Proposal

Curt Wolff and Kevin Smith (PDPPC stakeholder co-chairs) introduced the proposals that we voted on but started with making sure everyone understands the process. The co-chairs take comments and concerns of anything that is relevant for discussion in an upcoming prep call after each meeting. They meet with HCPF and go over items that were discussed or brought up. They have two recommendations from the last meeting that they will go over.

People can submit anything to Kevin at kevin.smith@pascohh.com, Curt at curtisl.wolff@gmail.com, or John Barry at john.r.barry@stste.co.us to request time on the PDPPC agenda where a recommendation can be made.

There were two recommendations made last month:

1) Allow homemaker services via contract

2) Allow people aged 16-17 to work.

These two draft recommendations went out from John Barry to the PDPPC email list. Curt and Kevin will go over these today. They compiled what they heard last time, and in the minutes and have created recommendations in the stakeholder-created format. If there are adjustments this needs to happen today, and we will again vote.

- Cheryl: Who at HCPF reviews and makes decisions about our proposals, and is the Medical Services Board part of this? What is the timeline to make a ruling?
- Erin said that responses are directed by her unit and, depending on the
 recommendation, they might have to do research. They need to get it cleared
 through their leadership. It depends on the recommendation. They have 20 days
 to respond once this is submitted (see the draft recommendation forms, which
 lay out the process). Cheryl asked if there is a committee of stakeholders to help
 them understand what we deal with.
- Kevin said right now is the chance to make adjustments.
- David Bolin said for IHSS they have to check licensure to see if they want anyone under 18 so this might need to be just for CDASS.

There was discussion about timelines and what happens if there is a rejection. This depends on the reasons, for example do we have to change a law?

- Erin said they know this is an issue and a workforce initiative. They want to be sure to answer all questions. They will look at IHSS and CDASS.
- Nathan Wofford said there were already family exceptions for 16 and 17 year olds. This is not accurate.
- Mark asked, what kind of timetable can we expect to see a response if they are approved today and how do we stay advised about when we get a response?
- Erin said that they had a 20-day response time. This would be October 12th. If there are any delays, they will advise us. There are 3800 PARS to key as well, but this is a priority.
- Lisa asked if people 16 years old can file a worker's comp claim. YES any employee can file if they are injured on the job.

Julie moved and Cheryl and Nathan Wofford both seconded the recommendation to allow 16 and 17 year olds as employees. There was no opposition and it will be submitted today as discussed in the meeting. Minor changes include:

- 1. Update the date
- 2. Add and/or in between CDASS and IHSS in case we cannot do this for IHSS
- 3. And add workers in the title.

This passed unanimously.

Contractors for Homemaker Services Proposal

We discussed the recommendation on using contractors for homemaking: This was reviewed, and people spoke highly of this. Mark wanted to be clear this should cover all homemaker services, not just housekeeping. One example would be meal prep. There was discussion about not-to-exceed amounts. All agreed it should say homemaking. Rene pointed out some minor typographical errors which will be corrected.

There was discussion about all that has to happen to hire someone as a 1099 worker. There are very specific rules. There may be a need to carry insurance. Some may do better just being hired as a CDASS employer. Linda Skaflen said they might need to separate CDASS and IHSS. There were a number of questions and discussion points. It was decided that this needs a bit more work. Mark will make edits of the recommendation and work with John so we will vote on this next month.

Open Forum 2:

- Julie said she will not be able to take notes in October (may not be present, but definitely not able to take notes)
- Lisa said she had two items for discussion at later time
 - 1. Being over cost containment: This has been a number that has been around for a long time. We should discuss if this is still the right number.
 - 2. More instruction or talk around emergency backup plans around CDASS especially with caregiver shortage, IHSS not really being an option, etc.
- Erin: Mentioned earlier about ARPA. Yesterday, HCPF leadership presented a plan to JBC and received approval to move forward and also got conditional approval from CMS. This means a huge infusion of funding for infrastructure and innovation. There will be some touchpoints in consumer direction and more information will come. There was a press release out of the Governor's Office. This also will raise the minimum wage for workers to \$15 an hour. More than 85% of CDASS workers are paid over \$15 already. This shows we are great employers.
- Rebecca from PPL said in August they did not get the newsletter out but that the September newsletter will go out soon and include anything from August. They will also include a teaser of a redesign for their Time4Care EVV app. This is coming out on 9/30. The Time4Care redesign is a refreshed look of the app to make it more user-friendly. There will be a message in the app as well about this and resources for the redesign on the EVV page of PPL's website.
- John Barry recently learned that October is disability employment awareness month and he wanted to acknowledge this.

• John also mentioned that there is a group of people working around improving this meeting. If all goes well next month, we will trial breakout rooms. It will not be perfect to start. One group will be clients/employers only.

The meeting adjourned at 3:50 p.m.

Notes taken by Julie Reiskin